

# NATIONAL HIGH SCHOOL ETHICS BOWL

## Team Authorization Form



### SCHOOL + COACH INFORMATION

Name of School: \_\_\_\_\_

Street Address: \_\_\_\_\_ City, ST, ZIP: \_\_\_\_\_

Coach Name: \_\_\_\_\_ Coach Phone Number: \_\_\_\_\_

### PARTICIPATING STUDENTS

Please list the names of all students from your school who will participate in the National High School Ethics Bowl April 12-14, 2024. You may also list any additional adult chaperones here (please identify them accordingly).

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### AUTHORIZATION FOR PARTICIPATION

I, the undersigned, authorize the students listed above to represent my school at the National High School Ethics Bowl April 12-14, 2024, hosted by the Parr Center for Ethics at the University of North Carolina at Chapel Hill. I certify that they are all enrolled students in grades 9-12. The above-named adult(s) have the school's permission to be responsible guardians for the students while attending the event.

Name of School Administrator (Print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_